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** CONTINUING DATA ***** *KOF*

This application is a DIV of 09/993,070 11/13/2001 PAT 6,749,111
 which is a CIP of 09/911,329 07/23/2001 PAT 6,607,081
 which is a CIP of 08/980,467 11/28/1997 PAT 6,273,413
 and is a CIP of 09/390,929 09/07/1999 PAT 6,331,000
 and said 09/993,070 11/13/2001
 is a CIP of 09/664,698 09/19/2000 PAT 6,315,194
 which claims benefit of 60/155,281 09/21/1999
 and said 09/993,070 11/13/2001
 claims benefit of 60/338,919 11/05/2001

** FOREIGN APPLICATIONS ***** *KOF*

F REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/07/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	OH	22	7	2

ADDRESS

28995
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TITLE

Automated banking machine

<p>FILING FEE RECEIVED 770</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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